

UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT
NOTICE OF APPEAL NOTIFICATION FORM
Please Fill Out Completely

April 21, 2008

CASE INFORMATION:

Short Case Title: JOSEPH BIVINS-v- M C KRAMER
Court of Appeals No. (leave blank if a unassigned
U.S. District Court, Division & Judge Name: NORTHERN DISTRICT OF CALIFORNIA,
SAN FRANCISCO DIVISION
Criminal and/or Civil Case No.: CV 07-05643 MHP
Date Complaint/Indictment/Petition Filed: 11/6/07
Date Appealed order/judgment *entered*: 3/5/08
Date NOA *filed*: 3/27/08
Date(s) of Indictment Plea Hearing Sentencing

COA Status (check one): ☐ granted in full (attach order) ☒ denied in full (send record)
☐ granted in part (attach order) ☐ pending

Court Reporter(s) Name & Phone Number: NONE

Magistrate Judge's Order? If so, please attach.

FEE INFORMATION

Date Docket Fee Paid: Date Docket Fee Billed:
Date FP granted: Date FP denied:
Is FP pending? ☐ yes ☒ no Was FP limited ☐? Revoked ☐?
US Government Appeal? ☐ yes ☒ no
Companion Cases? Please list:

Please attach copy of any order granting, denying or revoking FP.

COUNSEL INFORMATION (Please include email address)

Appellate Counsel: Appellee Counsel:
JOSEPH BIVINS - B-63111 NO APPEARANCE
FOLSOM STATE PRISON
P.O. BOX 950
FOLSOM, CA 95763

☐ retained ☐ CJA ☐ FPD ☒ Pro Se ☐ Other ***Please attach appointment order.***

DEFENDANT INFORMATION

Prisoner ID: Address:
Custody:
Bail:

AMENDED NOTIFICATION INFORMATION

Date Fees Paid: 9th Circuit Docket Number:

Name & Phone Number of Person Completing this Form: Gina Agustine-Rivas
(415) 522-2087